

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.

Full Name (Last, First, Middle Initial)

William W Whisenhunt

Mailing Address 205 Amherst Dr

City

Tullahoma

State

TN

Zip Code

37388-5814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Requested

Occupation
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: 30588161

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Sheila M McCarley

Mailing Address 6463 Strathspey Dr

City

Memphis

State

TN

Zip Code

38119-7719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Anesthesia

Occupation
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: 30588166

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Annette M Chenevey

Mailing Address 5923 Ayala Avenue

City

Oakland

State

CA

Zip Code

94609-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Permanente Medi Grp Ha-
ward Kaiser

Occupation
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: 30588173

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

755.00

TOTAL This Period (last page this line number only)